



IFW

Customized PTO/SB/21 (12-04)

## TRANSMITTAL FORM

(for all correspondence after initial filing)

Total number of pages in this submission =

|                |                |
|----------------|----------------|
| Application #  | 10/532,977     |
| Confirmation # | 3081           |
| Filing Date    | 04/28/2005     |
| First Inventor | CHENG          |
| Art Unit       | 2836           |
| Examiner       | Unassigned     |
| Docket #       | P08608US00/RFH |

### ENCLOSURES (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Fees calculated below                | <input type="checkbox"/> Response to Missing Parts/Incomplete Appl. |
| <input checked="" type="checkbox"/> Preliminary Amendment     | <input type="checkbox"/> Certified Copy of Priority Document(s)     |
| <input checked="" type="checkbox"/> including Attachments A-B | <input type="checkbox"/> Information Disclosure Statement           |
| <input type="checkbox"/> After Final Amendment/Reply          | <input type="checkbox"/> Drawing(s)                                 |
| <input type="checkbox"/> including Attachment(s)              | <input type="checkbox"/> Terminal Disclaimer                        |
| <input type="checkbox"/> Extension of Time Petition           | <input type="checkbox"/>  |
| <input type="checkbox"/>                                      | <input type="checkbox"/>  |

### FEES CALCULATION: For claims if required and/or other fees as shown below:

|   | NOW | Previously Paid For | Present Extra | Rate       | \$     |
|---|-----|---------------------|---------------|------------|--------|
| <input checked="" type="checkbox"/> TOTAL CLAIMS  | 58  | - 38                | 20            | X \$ 50 =  | 1000   |
| <input checked="" type="checkbox"/> INDEPENDENT CLAIMS                                  | 6   | - 7                 | 0             | X \$ 200 = | 0      |
| TOTAL OF ABOVE CLAIMS FEES =  |     |                     |               |            | 1000   |
| <input checked="" type="checkbox"/> Reduction by ½ for small entity status of applicant |     |                     |               |            | 500    |
| SUBTOTAL =  |     |                     |               |            | 500    |
| <input type="checkbox"/> Fee for extension of time (per attached Petition)              |     |                     |               |            |        |
| <input type="checkbox"/> Other fee for  |     |                     |               |            |        |
| TOTAL OF ALL FEES =   |     |                     |               |            | 500.00 |

A CREDIT CARD PAYMENT FORM (PTO-2038) in the amount of \$500.00 is enclosed.

- The Commissioner is authorized to charge any fee, additional fee or extension fee due in connection herewith to Deposit Account No. 12-0555:
- (1) if no payment or an insufficient payment is enclosed and a fee is due in connection herewith; or  
(2) if no petition for extension of time is enclosed but an EOT is required - and in this event, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time of as many months as are required to render this submission timely.

Date: January 19, 2006

By: Ross F. Hunt, Jr.  
Registration No.: 24,082

STITES & HARBISON PLLC • 1199 North Fairfax St. • Suite 900 • Alexandria, VA 22314  
TEL: 703-739-4900 • FAX: 703-739-9577 • Customer No. 00881



AMENDMENT

|                |                |
|----------------|----------------|
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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SIR:

Preliminary to the examination thereof:

A) please consider the responsive **Remarks** provided herewith in **Attachment A**; and

B) please amend the above identified application as follows:

- **Amendments to the Claims** are reflected in the listing of the claims provided herewith in **Attachment B**.

Respectfully submitted,



By: Ross F. Hunt, Jr.

Registration No.: 24,082

Date: January 19, 2006

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